

**Penn Waste, Inc.**  
**Automatic Payment Plan Application Form**

PLEASE *PRINT* THE FOLLOWING INFORMATION:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_

BANK NAME \_\_\_\_\_

CHECKING ACCOUNT # \_\_\_\_\_

BANK ROUTING # (9 DIGITS): \_\_\_\_\_  
(# BETWEEN THE “:” SYMBOLS)

THE TRANSACTION WILL BE CHARGED BASED ON YOUR NORMAL BILLING SCHEDULE:

I hereby authorize a monthly bank draft payment from the account designated above.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
DATE

**PLEASE ATTACH A VOIDED CHECK TO THIS FORM**

**For Office Use Only:**

TRUX ACCOUNT NUMBER \_\_\_\_\_

Start Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_